

## Appendix C: Sample Coversheet for Written Summary of Group's Analysis

|                                |        |                    |
|--------------------------------|--------|--------------------|
| <b>Meeting Date:</b>           |        |                    |
|                                |        |                    |
| <b>Demographic Information</b> |        |                    |
| Student Name:                  | ID#:   | AYP Subgroup(s):   |
| School:                        | Grade: | Retention History: |

|                                       |  |
|---------------------------------------|--|
| <b>Identified AREA(s) of CONCERN:</b> |  |
|                                       |  |

|   |                                |   |
|---|--------------------------------|---|
| <b>Observations.</b> (Attach observation form/summary): |                                |   |
|   | <u>Behavioral observations</u> | <u>Relationship to academic functioning</u> |
| Observation #1:   |                                |   |
| Observation #2:   |                                |   |
| <b>Educationally relevant medical findings:</b>         |                                |   |
| <b>Diagnostic assessment results:</b>                   |                                |   |

| Intervention Summary |                                 |                    |                           |                         |                          |                          |                          |
|----------------------|---------------------------------|--------------------|---------------------------|-------------------------|--------------------------|--------------------------|--------------------------|
|                      | <u>Instruction/Intervention</u> | <u>Implementer</u> | <u>Duration/Frequency</u> | <u>Fidelity/Support</u> | <u>RtI Response</u>      |                          |                          |
|                      |                                 |                    |                           |                         | +                        | ?                        | -                        |
| Core                 |                                 |                    |                           |                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Targeted             |                                 |                    |                           |                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Intensive            |                                 |                    |                           |                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

|  |                 |               |              |                        |                       |  |
|--|-----------------|---------------|--------------|------------------------|-----------------------|--|
| <b>Analysis of Response to Intervention Data</b> (See attached data which includes graphs)                               |                 |               |              |                        |                       |  |
|  |                 |               |              |                        |                       |  |
| <b>1. Performance discrepancy</b> (level of performance: pre- and post-interventions):                                   |                 |               |              |                        |                       |  |
| <u>State</u>   | <u>District</u> | <u>School</u> | <u>Class</u> | <u>SES Group Comp:</u> | <u>Peer Group #2:</u> |  |
|  |                 |               |              |                        |                       |  |
| <b>2. Rate of Progress</b> (Attach documentation of intervention intensity, rate of progress, expected rate of progress) |                 |               |              |                        |                       |  |
|  |                 |               |              |                        |                       |  |

|                              |
|------------------------------|
| <b>3. Statement of Need:</b> |
|                              |

**Consideration of exclusionary factors.** Determine whether level of performance and rate of progress are primarily the result of any of the following. Specify the documentation that supports the groups' conclusion for each.

| Yes                      | No                       |   |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | Visual, hearing, or motor disability                  |
| <input type="checkbox"/> | <input type="checkbox"/> | Intellectual disability                               |
| <input type="checkbox"/> | <input type="checkbox"/> | Emotional/behavioral disability                       |
| <input type="checkbox"/> | <input type="checkbox"/> | Irregular pattern of attendance or high mobility rate |
| <input type="checkbox"/> | <input type="checkbox"/> | Cultural factors                                      |
| <input type="checkbox"/> | <input type="checkbox"/> | Environmental or economic factors                     |
| <input type="checkbox"/> | <input type="checkbox"/> | Classroom behavior                                    |
| <input type="checkbox"/> | <input type="checkbox"/> | Limited English proficiency                           |

| Summary of eligibility criteria for a specific learning disability |                          |   |
|--|--------------------------|---|
| Yes  | No                       |   |
| <input type="checkbox"/>   | <input type="checkbox"/> | Student does not achieve adequately for age or does not meet grade-level standards in one or more of the following areas (Check all that apply):  |
|  |                          | <input type="checkbox"/> Basic reading skills<br><input type="checkbox"/> Reading fluency skills<br><input type="checkbox"/> Reading comprehension<br><input type="checkbox"/> Mathematics calculation<br><input type="checkbox"/> Mathematics problem solving<br><input type="checkbox"/> Written expression<br><input type="checkbox"/> Oral expression<br><input type="checkbox"/> Listening comprehension |
| <input type="checkbox"/>   | <input type="checkbox"/> | Student does not make adequate progress based on response to scientific, research-based intervention, OR combination of response to scientific, research-based intervention & pattern of strengths and weaknesses.  |
| <input type="checkbox"/>   | <input type="checkbox"/> | The student's progress is not primarily the result of any of the exclusionary factors or lack of appropriate instruction.   |
| <input type="checkbox"/>   | <input type="checkbox"/> | The student demonstrates evidence of eligibility for a specific learning disability.  |
| <input type="checkbox"/>   | <input type="checkbox"/> | The student needs interventions that differ significantly in intensity and duration from what can be provided through general education resources alone.  |

| Signatures of group determining eligibility. Each of the following individuals certifies their agreement with the determination of eligibility and assurance that this determination was made in accordance with subsection (6) of Rule 6A-6.0331. |                             |                      |
|--|-----------------------------|----------------------|
| ESE Administrator/Designee   | General Education Teacher   | Parent               |
| School Psychologist  | Speech/Language Pathologist | Other: Name/Position |
| Other: Name/Position   | Other: Name/Position        | Other: Name/Position |
| A  |                             |                      |
| <b>The following team members DISAGREE with the conclusion of the group.</b> Attach a separate statement presenting each member's conclusion.  |                             |                      |
| Name/Position  | Name/Position               | Name/Position        |